## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

520.411 09X00

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			20					RATE	FEE	]	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			20 minus 20=		* O		,	X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			5 minus 3 =		* 2			X42=		OR	X84=	168
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT					.140		1	.000	700
* If the difference in column 1 is less than zero, enter					r "0" in c	column 2		+140=		OR	+280=	70 B
CLAIMS AS AMENDED - PART II							TOTAL		OR	TOTAL		
		(Column 1)	(Column 2)			(Column 3)	•	SMALL	ENTITY	OR	OTHER SMALL I	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	_	=		X42=		OR	X84=	
Ĺ	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	PENDEN	T CLAIM			+140=			+280=	
								TOTAL		OR	TOTAL	
								ADDIT. FEE		OR	ADDIT. FEE	
		(Column 1)	,	(Colu	mn 2) HEST	(Column 3)	1 .			1		
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	֡֡֓֞֓֓֓֓֓֓֓֓֓֓֡֓֡֓֓֓֡֓֡֓֡֓֡֓֡֓֡֓֡֡֡֡֡֡֡֡	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
L	FIRST PRESE	NTATION OF M	JLTIPLE DEF	PENDEN	CLAIM		1	+140=		OR	+280=	
								TOTAL ADDIT. FEE	,	OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)				-		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=		X42=		OR	X84=	
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	T CLAIM		┛					<b></b>
*	If the entry in colu	mn 1 is less than t	ne entry in colu	ımn 2 writ	e "0" in co	olumn 3	Į	+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		ber Previously Pa					er fou	and in the app	oropriate bo	x in co	lumn 1.	